PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

SEP 2 7 2005

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

or Fax

Alexandria, Virginia 22313-1450 (703) 746-4000

stand be used on design with the second of t INSTRUCTIONS: This form d for fransmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for appropriate. All further correspon indicated unless corrected below or di maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

51414

7590

06/29/2005

GOODWIN PROCTER LLP PATENT ADMINISTRATOR **EXCHANGE PLACE** BOSTON, MA 02109-2881

09/29/2005 WABDELR3 00000070 10697548

01 FC:2501 02 FC:1504 700.00 DP

300.00 DP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name (Signature

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/697,548 10/30/2003 Jonathan Levene SNS-015 7583

TITLE OF INVENTION: APPARATUS AND METHODS FOR TEXTURE MAPPING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	09/29/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	1	
SAJOUS, WESNER		2676		345-582000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2. Goodwin Procter LLP			
	RESIDENCE DATA TO E			d 71-7		
recordation as set forth i	s an assignee is identified by n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	pear on the patent. If an assign for filing an assignment.	nee is identified below, the	document has been filed for
(A) NAME OF ASSIGN	IEE	(E	3) RESIDENO	CE: (CITY and STATE OR CO	UNTRY)	
	hnologies, Inco			n, Massachusetts		•
				oatent): 🗖 Individual 🙇 C	orporation or other private gr	oup entity 🚨 Government
		41	4b. Payment of Fee(s):			
Issue Fee			A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized by that the required fee(s), or credit any overpayment, to Deposit Account Number $07-1700$ (enclose an extra copy of this form).			
5. Change in Entity Status	(from status indicated above	e)				
a. Applicant claims S	SMALL ENTITY status. See	37 CFR 1.27.	b. Applie	cant is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Issue Publication Fee (if required) words of the United States Pater	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if and from anyon Office.	ny) or to re-apply any previous e other than the applicant; a reg	ly paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature	Villa 2	Had	es	Date Se	eptember 27, 200)5
Toward on maintaid name	William R. Hau	lbrook	•	The state of	53,002	•

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name

Registration No.